To be completed by State Office – Date Received:	
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Grant Application Signature Page State of Kansas Department of Health and Environment

Grant Period: July 1, 2015 – June 30, 2016

1000 SW Jackson, Suite 340 Topeka, Kansas 66612-1365

This form, complete with signatures, is required for all grant applications to be considered complete.

Upload to Catalyst as an attachment on the Organization Summary Page.

All applications due March 16, 2015.

Applicant: (Name of Agency) Catholic Social Sonic	Child Care Licensing Program	
	Chronic Disease Risk Reduction	
Street Address/PO Box 906 Central Ave. City Dodge City Zip Code 6780)	Community-Based Primary Care Clinic Grant	
	Disease Intervention	
	Family Planning	
	Healthy Family Services	
	HIV Prevention Program – Community	
Name of Director	HIV Prevention Program - Opt Out	
Deborah J. Snapp	Immunization Action Plan	
	Maternal & Child Health	
	Pregnancy Maintenance Initiative (PMI)	77,082.85
Primary Contact	PREP	1 7 55.52
Deborah U Snapp	Public Health Emergency Preparedness	
	Ryan White	
	State Formula	
Telephone of Primary Contact	Teen Pregnancy Targeted Case Management	
	WIC/ICP Collaborative	
620-227-1588	Total Funds Requested:	
	Management of the second of th	

Signatures:

President/Chairman/Local Board of Health or Board of Directors

Date: 3/18/05

Administrator/Director

Date: 3/18/0/5